

Substitution for form 1449/PTO <div style="text-align: center; font-weight: bold; font-size: 1.2em; margin: 10px 0;"> INFORMATION DISCLOSURE STATEMENT BY APPLICANT </div> <div style="text-align: center; font-weight: bold; font-size: 0.8em; margin-top: 10px;"> <i>(use as many sheets as necessary)</i> </div>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th colspan="2" style="text-align: center; font-weight: bold; font-size: 0.9em;">Complete if Known</th> </tr> <tr> <td style="width: 50%;">Application Number</td> <td>10/770,519</td> </tr> <tr> <td>Filing Date</td> <td>2/4/2004</td> </tr> <tr> <td>First Named Inventor</td> <td>KUDO, et al.</td> </tr> <tr> <td>Group Art Unit</td> <td>2434</td> </tr> <tr> <td>Examiner Name</td> <td>T. Hailu</td> </tr> <tr> <td>Attorney Docket Number</td> <td>520.43478X00</td> </tr> </table>	Complete if Known		Application Number	10/770,519	Filing Date	2/4/2004	First Named Inventor	KUDO, et al.	Group Art Unit	2434	Examiner Name	T. Hailu	Attorney Docket Number	520.43478X00
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*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

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